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**GENERAL NOTICE**


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**NOTICE 89 OF 2007****DEPARTMENT OF LABOUR****SKILLS DEVELOPMENT ACT, 1998 (ACT NO. 97 OF 1998)**

**PROPOSED AMENDMENTS TO SECTOR EDUCATION AND TRAINING  
AUTHORITIES (SETAs) GRANT REGULATIONS REGARDING MONIES  
RECEIVED BY A SETA AND RELATED MATTERS**

I, Membathisi Mphumzi Shepherd Mdladlana, Minister of Labour, in terms of section 36 of the Skills Development Act, 1998 (Act No. 97 of 1998), and after consultation with the National Skills Authority, hereby publish for public comment proposed amendments to the Sector Education and Training Authorities (SETAs) Grant Regulations regarding monies received by a SETA and related matters published in Government Notice No. R.713 of 18 July 2005.

Interested parties are invited to submit written comments on the proposed regulations within **30** days after the publication notice by:-

- (a) Posting comments to: The Executive Officer  
National Skills Authority  
Mr S Morotoba  
Department of Labour  
Private Bag X117  
Pretoria  
0001
- (b) Fax comments to: The Executive Officer  
National Skills Authority  
(012) 309 4237
- (c) Deliver comments to: Room 371  
Third Floor  
Labour House Building  
215 Schoeman Street  
Pretoria
- (d) E-mail to: malesela.mokoele@labour.gov.za

## SCHEDULE

### Definitions

1. In these regulations “the Regulations” means the Sector Education and Training Authorities (SETAs) Grant Regulations regarding monies received by a SETA and related matters promulgated by Government Notice No.R.713 of 18 July 2005.

### Amendment of Annexures

2. The Regulations are hereby amended by the substitution for Annexure 2 of the following Annexure:

**ANNEXURE 2**

**WORKPLACE SKILLS PLAN**

**and**

**ANNUAL TRAINING REPORT**

**Private Sector Template**

**Minimum Requirements**

## SECTION A: ADMINISTRATIVE DETAILS

### ENTITY DETAILS

<b>A1: Entity name</b>										
<b>A2: Skills Development Levy (SDL) number</b>										
<b>A3: Postal address of the main office</b>										
	<b>City</b>									
	<b>Province</b>									
	<b>Postal code</b>									
<b>A4: Standard Industrial Code (SIC code) for the main business activity</b>										

### DETAILS OF THE PERSON WHO COMPLETED THE FORM

<b>A5: Title</b>	
<b>A6: Surname</b>	
<b>A7: First name</b>	
<b>A8: ID number</b>	
<b>A9: Telephone number</b>	
<b>A10: E-mail</b>	

### BANKING DETAILS

<b>A11: Name of bank</b>	
<b>A12: Account number</b>	
<b>A13: Name of account holder</b>	
<b>A14: Type of account</b>	
<b>A15: Branch name</b>	
<b>A16: Branch code</b>	

## SECTION B: EMPLOYMENT SUMMARY

**B1: Total number of employees per occupational category, by gender, population group, disability status and age group**

Occupations		Male				Female				Total	People with Disability				Age groups		
Code	Occupational category	A	C	I	W	A	C	I	W		A	C	I	W	<35	35-55	>55

**B2: Total number of employees in each province**

## SECTION C: SKILLS DEVELOPMENT

**C1: Planned beneficiaries of training per occupational category, by gender, population group and disability status**

Occupations		Male				Female				Total	People with Disability			
Code	Occupational category	A	C	I	W	A	C	I	W		A	C	I	W

**C2: Planned training - unemployed**

Code	Occupational category	Type of learning programme	Number to be trained at		
			Entry level	Intermediate level	Advanced level

**C2: Planned training - employed**

Code	Occupational category	Type of learning programme	Number to be trained at		
			Entry level	Intermediate level	Advanced level

**ABET Level**

**Total number to be trained**

ABET Level 1	
ABET Level 2	
ABET Level 3	
ABET Level 4	

## SECTION D: ANNUAL TRAINING REPORT

(Report on training interventions)

**D1: Number of actual beneficiaries of training per occupational category, by gender, population group and disability status**

Occupations		Male				Female				Total	PWD			
Occupational category		A	C	I	W	A	C	I	W		A	C	I	W

**D2: Number of beneficiaries who completed the training interventions**

Code	Occupational category	Type of learning programme	Number trained at		
			Entry level	Intermediate level	Advanced level

**D3: Total number of beneficiaries who completed ABET programmes**

ABET training	Total number of employees
ABET Level 1	
ABET Level 2	
ABET Level 3	
ABET Level 4	

## SECTION E: GENERAL COMMENTS

*Insert any clarification or comment that you wish to make on any aspect of the WSP or ATR.  
(Provide the number of the item that your comment refers to.)*

## SECTION F: AUTHORISATION and STAKEHOLDER SUPPORT (WSP and ATR)

*Section F of the template, with the original signatures, must be submitted to the skills development division of the relevant SETA by hand, post or fax by 20 June.*

### DECLARATION

We, the undersigned, submit this information in fulfilment of this entity's legal obligation in terms of the skills development legislation and regulations. We declare that, to the best of our knowledge, the information contained in this WSP/ATR is accurate and up to date. We recognise that any inaccurate statement in this document may constitute fraud and be subject to the full penalty of the law.

### SIGNATORIES

<b>F1: Designated signatory</b>	Name and surname	Telephone number	Original signature	Date
The person who completed the WSP/ATR				
Designated employee representative				

### AUTHORISATION

<b>F2: CEO/Managing Director</b>				
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